



Active- Duty Military Residency Waiver

This form is to be completed by an active-duty member of the U.S. Armed Forces and their legal dependents stationed in Colorado on a permanent change-of-station basis or on a temporary assignment to duty in Colorado.

Student Name: _____ Student ID#: _____

Email Address: _____ Phone: _____

Student Signature: _____ Date: _____

Please indicate the semester and year for which you are requesting exemption:

Fall 20____ Spring 20____

Student Status: Active-Duty Service Member Dependent of a Military Member

Please provide a copy of your Military or dependent ID card

If you are a dependent: Name of Armed Forces Member (Sponsor): _____

Armed Forces Affiliation: US Army USAF US Navy USMC USCG

Education Services Officer Certification

I certify that _____ is an active duty member of the U.S. Armed Forces and is currently assigned to:

Permanent duty station (PCS) in Colorado at _____

Temporary assignment to duty (TDY) in Colorado at _____

I certify that _____ is a legal dependent of this member.

Certification is valid for: Fall 20____ Spring 20____

Certifying Official: _____
Print Name/Title Signature Date

Office Use Only: Processed By: _____ Date: _____